

Reimbursement Claim Checklist

This checklist was prepared for and is directed to sponsors' claim preparers to help them complete claims for reimbursement.

Please refer to the following checklist prior to submitting the sponsor's claim for reimbursement. **An error or omission in any of the following items will cause a delay in the sponsor's reimbursement.**

Reporting

- ☐ Item 1. Is a label affixed to the claim form? If no label is available, did you type or print the sponsor's agreement and vendor number along with the name and address of the agency in the space provided in Item 1?
- ☐ Item 2. If this is an adjusted claim, was an "X" marked in Item 2? If not, leave this item blank.
- ☐ Item 3. Is the month reported in Item 3 the claim month, **not** the month the claim was prepared?

Note: Remember if this claim spans two consecutive months, one of those months may not include more than 10 days of operation. Enter the month with the largest number of days in Item 3. **Do not report data that spans across three calendar months.**

4 & 5. For State Use Only.

- ☐ Item 6. Enter the beginning and ending dates covered by this claim. See the above note regarding the number of days eligible to report.
- ☐ Items 7 & 8. Did you report the number of approved sites operating for item 7, and the number of days that food service was provided for item 8? Item 8 must relate to item 6. The claim cannot be processed without this information. **Sponsors are to claim meals served only at approved sites.**
- ☐ Item 9. Was the average daily number of eligible children served calculated on the basis of the largest first meal service (breakfasts, lunches or suppers)? If the calculations end in a remainder greater than zero, always round up to the next whole number. Example equation: 972 (first lunches) divided by the number of days (22), equals 44.18, rounded up and reported as 45.

Items 10. through 13.

- ☐ Was the number of first meals served by meal type reported on the associated first meals line?

- [] Was the number of second meals served by meal type reported on the associated second meals line? Second meals served **cannot exceed two percent** of the first meals served of each meal type.
- [] Was each meal type totaled to reflect the correct “total meals served” in each meal category?
- [] Item 14. Were any funds, received or accrued, reported for food service from adult meals, individual donations, or grants? These may include any State and local contributions and reimbursement from **other federal programs**. Please claim income in appropriate category. Do not claim cash advance or summer food program reimbursements.
- Items 15, 16, 17, and 19.
- [] Enter the total gross **food costs, food labor, other, and administrative costs and labor** incurred during this claim period. *Round off to the nearest whole dollar and do not report cents.* Refer to the current Sponsor’s Handbook for detailed instructions of allowable costs. Food costs (item 15) must be reported to process your claim.
- [] Item 18. Enter the **Subtotal** of food costs, food labor, and other costs (items 15, 16, & 17 only).
- [] Item 20. Enter the gross **Total program costs** (item 18 plus item 19 only).

Certification

- [] Is there an *original* signature of an authorized official on **both** the original and a copy of the claim? **Carbon, stamped, or photocopied signatures will not be accepted.**
- [] Was the telephone number of the claim preparer listed on the claim? If more than one telephone number is available, list both.

Audit Checks

- [] Is the average daily number of eligible children (item 9) less than or equal to your total capacity? Under no circumstances should it be greater.
- [] Are all reported second meals served 2 percent or less of the first meals served?
- [] Do total meals equal first meals plus second meals for breakfasts, lunches, suppers, and supplements served?

[] Does Item 18 correctly reflect the sum of food costs, food labor, and other costs?

[] Does Item 20 correctly reflect the sum of item 18 (subtotal) and item 19, (administrative costs and labor)?

General

[] Is the claim legibly hand printed or typed?

[] Did the claim preparer make **an original and one copy** of the sponsor's claim to submit, **both with original signatures**?